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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish a summary of information collection requests under OMB review, in compliance with the Paperwork Reduction Act (44 U.S.C. 35). To request a copy of these documents, call the SAMHSA Reports Clearance Officer on (240) 276-1243.

Project: Mental Health Block Grant Ten Percent Set Aside Evaluation of First Episode Psychosis - NEW

The Substance Abuse and Mental Health Services Administration (SAMHSA) is directed by Congress through its FY 2016 Omnibus bill, Public Law 114-113, to set aside ten percent of the Mental Health Block Grant (MHBG) allocation for each state to support evidence-based programs that provide treatment for those with early serious mental illness (SMI) and a first episode psychosis (FEP) – an increase from the previous five percent set aside.

The purpose of this 3-year evaluation is to assess the relationship between fidelity of selected coordinated specialty care (CSC) programs supported with Mental Health Block Grant (MHBG) Ten Percent Set Aside funding and participant outcomes. There are approximately 250 sites

implementing CSC programs with MHBG ten percent set aside funding. All 250 sites will be asked to report on their implementation through an online survey. Up to 32 CSC sites across the nation will be recruited to participate in a process and outcome evaluation. The data collection activities for the Mental Health Block Grant Ten Percent Set Aside Evaluation will include the following seven data collection activities:

- **Site Survey:** This is a one-time online survey with site directors of all 250 centers using MHBG ten percent set aside funding (not just those included in the evaluation). The survey focuses on how centers across the U.S. are providing services to individuals with First Episode Psychosis (FEP) in their communities.
- **Agency Director/Administrator Interview:** This semi-structured interview will be conducted twice with Agency Director/Administrators at each of the 32 CSC sites in the evaluation about the successes and challenges involved in implementing the CSC program.
- **Coordinated Specialty Care (CSC) Staff Interview:** This semi-structured interview will be conducted twice with CSC Staff at each of the 32 CSC sites in the evaluation about the successes and challenges involved in implementing the CSC program.
- **Coordinated Specialty Care (CSC) Participant Interview:** This semi-structured interview will be conducted twice with participants involved in programs at the 32 CSC sites in the evaluation. The purpose of the interview is to gather participant input on how CSC programs are operating and their thoughts and opinions about successes and challenges while participating in the CSC program.
- **State Mental Health Authority Interview:** This is a one-time semi-structured interview with state mental health leadership in the states where the 32 sites in the evaluation are located. The interview focuses on their thoughts and opinions about context in which CSC programs are implemented within their state and the state's role in the implementation of the CSC programs.
- **Fidelity Interview:** This interview will be conducted twice during the evaluation with up to four CSC staff at each site. The phone interview is designed to be used in conjunction with the First Episode Psychosis Fidelity Scale (FEPS-FS) to examine whether elements of CSC are implemented at the sites.
- **Possible Administrative Data Elements:** Each site will provide the evaluation team with administrative data elements on participant demographics and outcomes. To

minimize burden and maximize the number of sites reporting outcome measures, we will seek sites that are already collecting the individual level outcome measures identified for this study including quality of life, symptomology, employment status, educational status, and living situation. These administrative data elements are included in the core collection of measures recommended by the Mental Health Research Panel through the PhenX Toolkit (www.phenxtoolkit.org) for use by all mental health researchers. Thus, we expect that majority of the sites will already be collecting these measures as a part of their routine practice.

Table 1. Estimated Burden Hours

Data Collection Activity	Number of respondents	Responses per respondent	Total responses	Average burden per response (in hours)	Total burden (in hours)
Site Survey	250	1	250	0.2	50
Agency Director/ Administrator Interview	64	1	64	2.0	128
Coordinated Specialty Care (CSC) Staff Interview	192	1	192	2.0	384
Coordinated Specialty Care (CSC) Participant Interview	128	1	128	1.0	128
State Mental Health Authority Interview	32	1	32	2.0	64
Fidelity Interview	64	4	256	4.0	1,024
Possible Administrative Data Elements	32	18	576	5.0	2,880
Total	762		1,498		4,658

Please note this notice supersedes the one that was published on 6/12/15.

Written comments and recommendations concerning the proposed information collection should be sent by [INSERT DATE 30 DAYS AFTER DATE OF PUBLICATION IN THE FEDERAL REGISTER] to the SAMHSA Desk Officer at the Office of Information and Regulatory Affairs,

Office of Management and Budget (OMB). To ensure timely receipt of comments, and to avoid potential delays in OMB's receipt and processing of mail sent through the U.S. Postal Service, commenters are encouraged to submit their comments to OMB via e-mail to:

OIRA_Submission@omb.eop.gov. Although commenters are encouraged to send their comments via e-mail, commenters may also fax their comments to: 202-395-7285. Commenters may also mail them to: Office of Management and Budget, Office of Information and Regulatory Affairs, New Executive Office Building, Room 10102, Washington, D.C. 20503.

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